

# Work Order ID 121795

**\*121795\***

Page 1

Wednesday, July 02, 2014 3:34:53 PM

Item ID: D2582 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Hi-Skid Step Leg Ass'Y **8**  
 Start Date: 7/02/14 Start Qty: ~~10.00~~ **\*10\*** Cust Item ID:  
 Required Date: 7/02/14 Req'd Qty: 10.00 **\*10\*** Customer:  
 Reference:

Approvals: Process Plan: MCS Date: 14-07-03 Tooling: Date: Run Start **\*NR1\***  
 QC: Date: SPC (Y/N): Date: Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                           | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp      |
|--------------------------------|----------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|---------------------|
| <b>Draw Nbr</b>                | <b>Revision Nbr</b>                                |                      |         |        |              |               |               |                  |                     |
| D2582                          | Rev B                                              |                      |         |        |              |               |               |                  |                     |
| 100                            | Small Fab                                          | 0.00                 |         |        |              | <u>8x</u>     |               |                  | <u>14/07/28</u>     |
| <b>*100*</b>                   |                                                    |                      |         |        |              |               |               |                  |                     |
| Small Fab                      | Memo                                               | 0.00                 |         |        |              |               |               |                  |                     |
| Small Fab                      | Assemble as per Dwg D2582 and                      |                      |         |        |              |               |               |                  |                     |
| 110                            | QC5- Inspect part completeness to step on W/O      | 0.00                 |         |        |              | <u>8x</u>     | <u>d</u>      |                  | <u>14-07-28</u>     |
| <b>*110*</b>                   |                                                    |                      |         |        |              |               |               |                  |                     |
| QC                             | Memo                                               | 0.00                 |         |        |              |               |               |                  |                     |
| Quality Control                |                                                    |                      |         |        |              |               |               |                  |                     |
| 120                            | Identify as per dwg & Stock Location: <u>V1003</u> | 0.00                 |         |        |              | <u>8x</u>     |               |                  | <u>DMC 14-07-28</u> |
| <b>*120*</b>                   |                                                    |                      |         |        |              |               |               |                  |                     |
| Packaging                      | Memo                                               | 0.00                 |         |        |              |               |               |                  |                     |
| Packaging                      |                                                    |                      |         |        |              |               |               |                  |                     |

DAS  
36  
9-89

DAS  
19  
9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | Skid-tube <input type="checkbox"/><br>Machining <input type="checkbox"/><br>Thermoforming <input type="checkbox"/><br>Large Fab <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

### FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube                                                                                                                                                                    | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence |
| <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Outside Dimensions<br/> <input type="checkbox"/> Over/Under tolerance<br/> <input type="checkbox"/> Part Incorrect<br/> <input type="checkbox"/> Part Lost/Missing<br/> <input type="checkbox"/> Part Moved<br/> <input type="checkbox"/> Positioned Wrong<br/> <input type="checkbox"/> Power Loss/Surge           </div> <div> <input type="checkbox"/> Pressure/Forced Set-up<br/> <input type="checkbox"/> Temperature/Cure<br/> <input type="checkbox"/> Weld<br/> <input type="checkbox"/> Wrong Stock Pulled<br/> <input type="checkbox"/> Other           </div> </div> |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

**Work Order ID 121795**

Wednesday, July 02, 2014 3:34:53 PM

**\*121795\***

Page 2

Item ID: D2582 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: Hi-Skid Step Leg Ass'Y  
Start Date: 7/02/14 Start Qty: 10.00 **\*10\*** Cust Item ID:  
Required Date: 7/02/14 Req'd Qty: 10.00 **\*10\*** Customer:  
Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

130

QC21- Final Inspection - Work Order Release

0.00

**\*130\***

QC

Memo

0.00

Quality Control

14/7/29 *[Signature]*  
*[Signature]* 7-28

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | Skid-tube <input type="checkbox"/><br>Machining <input type="checkbox"/><br>Thermoforming <input type="checkbox"/><br>Large Fab <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |
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| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

### FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube                                                                                                                                                                    | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence |
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# Picklist Print

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Page 1

Work Order ID: 121795

**\*121795\***

Parent Item: D2582

**\*D2582\***

Parent Item Name: Hi-Skid Step Leg Ass'Y

Start Date: 7/02/14

Required Date: 7/02/14

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP Rev:F Removed Manufacturing 05-11-07 JLM  
 IPP Rev:G Added part # to Sub 06-08-10 JLM  
 IPP Rev H New pick list 08.01.11 EC verified by: DD

| Component Item ID/<br>Item Name            | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status<br>DAS<br>36<br>9-89 |
|--------------------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|-----------------------------|
| D2278<br><b>*D2278*</b><br>Step Leg        |                        | Manufactured  | No          |                     |                  | 100             | Each               | 12.0000        | 2           | 20           |               | 14/07/28       |                             |
|                                            |                        |               |             | <u>Location</u>     |                  |                 |                    | <u>Loc Qty</u> |             |              |               |                |                             |
|                                            |                        |               |             | GA                  |                  |                 |                    | 12             |             |              |               |                |                             |
|                                            |                        |               |             | 106213              |                  |                 |                    | 4              |             |              |               |                |                             |
|                                            |                        |               |             | 121102              |                  |                 |                    | 8              |             |              |               |                |                             |
| D2279<br><b>*D2279*</b><br>Step Spacer     |                        | Manufactured  | No          |                     |                  | 100             | Each               | 44.0000        | 1           | 10           |               | 14/07/28       | DAS<br>36<br>9-89           |
|                                            |                        |               |             | <u>Location</u>     |                  |                 |                    | <u>Loc Qty</u> |             |              |               |                |                             |
|                                            |                        |               |             | GA                  |                  |                 |                    | 44             |             |              |               |                |                             |
|                                            |                        |               |             | 112323              |                  |                 |                    | 17             |             |              |               |                |                             |
|                                            |                        |               |             | 117837              |                  |                 |                    | 27             |             |              |               |                |                             |
| D2322<br><b>*D2322*</b><br>Step Spacer     |                        | Manufactured  | No          |                     |                  | 100             | Each               | 11.0000        | 1           | 10           |               | 14/07/28       | DAS<br>36<br>9-89           |
|                                            |                        |               |             | <u>Location</u>     |                  |                 |                    | <u>Loc Qty</u> |             |              |               |                |                             |
|                                            |                        |               |             | GA                  |                  |                 |                    | 11             |             |              |               |                |                             |
|                                            |                        |               |             | 117845              |                  |                 |                    | 11             |             |              |               |                |                             |
| D3720-1<br><b>*D3720-1*</b><br>Step Spacer |                        | Manufactured  | No          |                     |                  | 100             | Each               | 10.0000        | 1           | 10           |               | 14/07/28       | DAS<br>36<br>9-89           |
|                                            |                        |               |             | <u>Location</u>     |                  |                 |                    | <u>Loc Qty</u> |             |              |               |                |                             |
|                                            |                        |               |             | GA                  |                  |                 |                    | 10             |             |              |               |                |                             |
|                                            |                        |               |             | 119017              |                  |                 |                    | 10             |             |              |               |                |                             |

6121845

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
|--------------------------------------------------------------|------|------|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |      |      |     | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> |                   | Skid-tube <input type="checkbox"/><br>Machining <input type="checkbox"/><br>Thermoforming <input type="checkbox"/><br>Large Fab <input type="checkbox"/> |             | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |              |  |  |
| Root Cause                                                   | Date | Step | Qty | Description of work order update or non-conformance                                                                                                                                | Initial Chief Eng | Action Description                                                                                                                                       | Sign & Date | Verification                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | QC Inspector |  |  |
| Design                                                       |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Doc/Data                                                     |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Equip/Tooling                                                |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Handling/Pre                                                 |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Material                                                     |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Operator                                                     |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Offset/Setup                                                 |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Process                                                      |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Supplier                                                     |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Training                                                     |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Transport                                                    |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |
| Unapproved                                                   |      |      |     |                                                                                                                                                                                    |                   |                                                                                                                                                          |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |  |  |

| FAULT CATEGORY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                            |                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other | _____<br>_____<br>_____ |

# Picklist Print

Wednesday, July 02, 2014 3:34:53 PM

Page 2

Work Order ID: 121795

**\*121795\***

Parent Item: D2582

**\*D2582\***

Parent Item Name: Hi-Skid Step Leg Ass'Y

Start Date: 7/02/14

Required Date: 7/02/14

Start Qty: 10.00

Required Qty: 10.00

DAS  
36  
9-89

8 D3720-2

Manufactured No

100 Each 0.0000 1 10

**\*D3720-2\***

Step Spacer

B121079 (8x) \*\*

14/07/28

MS20470AD4-4

Purchased No

100 Each 3,401.000 22 220

**\*MS20470AD4-4\***

Rivet, Universal Head

\*\*

14/07/28

DAS  
36  
9-89

## Location

## Loc Qty

## Loc Code

ST312

3401

118614

27

121652

180

M128401

1736

M129499

1458

176

MS20470AD4-5

Purchased No

100 Each 3,002.000 4 40

**\*MS20470AD4-5\***

RIVET, UNIVERSAL HEAD

\*\*

14/07/28

DAS  
36  
9-89

## Location

## Loc Qty

## Loc Code

ST312

3002

m126926

199

m128401

1653

m128813

1150

32

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | Skid-tube <input type="checkbox"/><br>Machining <input type="checkbox"/><br>Thermoforming <input type="checkbox"/><br>Large Fab <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>             Crosstube <input type="checkbox"/><br/>             Small Fab <input type="checkbox"/><br/>             Finishing <input type="checkbox"/><br/>             Composite <input type="checkbox"/> </div> <div>             Water Jet <input type="checkbox"/><br/>             Prod. Eng. Coord. <input type="checkbox"/><br/>             Rec/Store/Packaging <input type="checkbox"/><br/>             Supplier <input type="checkbox"/> </div> <div>             Engineering <input type="checkbox"/><br/>             Quality <input type="checkbox"/><br/>             Other <input type="checkbox"/> </div> </div> |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

| FAULT CATEGORY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Outside Dimensions<br/> <input type="checkbox"/> Over/Under tolerance<br/> <input type="checkbox"/> Part Incorrect<br/> <input type="checkbox"/> Part Lost/Missing<br/> <input type="checkbox"/> Part Moved<br/> <input type="checkbox"/> Positioned Wrong<br/> <input type="checkbox"/> Power Loss/Surge           </div> <div> <input type="checkbox"/> Pressure/Forced<br/> <input type="checkbox"/> Set-up<br/> <input type="checkbox"/> Temperature/Cure<br/> <input type="checkbox"/> Weld<br/> <input type="checkbox"/> Wrong Stock Pulled<br/> <input type="checkbox"/> Other           </div> </div> |  |  |